FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTI

| SECM | 1 1 | 1227 |
|-----------|--|--|
| \$58 \OWN | OMB/A OMB Numb Expires: Bitimated a | PPROVAL oer: 3235-0076 April 30, 2008 verage burden sponse 16.00 |
| SECTION | -1 / </th <th>SE ONLY</th> | SE ONLY |
| TON | Profix | Serial |
| ON | DATE I | RECEIVED |

| Name of Offering (check if this is an amendmen | • | te change.) | |
|---|--|--|------------------------------|
| Limited Liability Company Membership Interest Filing Under (Check box(es) that apply): Rule 50 | | Section 4(6) ULO | |
| Type of Filing: New Filing Amendment | | 340u. 1(0) 🗀 323. | - |
| | ASIC IDENTIFICATION DATA | | |
| 1. Enter the information requested about the issue | | | |
| Name of Issuer (check if this is an amendment ar 1633 Bayshore Associates, L.C., a California limi | | nange.) | |
| Address of Executive Offices (Number | and Street, City, State, Zip Code) ncisco, California 94111 | Telephone Number (In (415) 951-0500 | cluding Area Code) |
| Address of Principal Business C perations (Number (if different from Executive Off ces) | and Street, City, State, Zip Code) | Telephone Number (In (415) 951-0500 | chuding Area Code) PROCESSE |
| Brief Description of Business Real estate investm | ent | R | |
| Type of Business Organization corporation limited partnership business trust limited partnership | | (please specify): ted liability company | SEP 18 2007 |
| Actual or Estimated Date of Incorporation or Organization: | Month 7 | Year 0 7 ⊠ Actual | FINANCIAL Estimated |
| Jurisdiction of Incorporation or Organization: | • | Postal Service abbrevia ada; FN for other forei | gn . |

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Com nission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this no ice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required. A new filing must centain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the Federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

| | | A. BASIC IDENTI | FICATION DATA | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|---|------------------|--------------------------------------|-----------------------------|------------------|---|
| Enter the information requ Each promoter of the | | lowing: suer has been organized w | vithin the past five years: | | |
| • | ne: having the p | • | • • | sposition of, 10 | % or more of a class of equity |
| | | f corporate issuers and of | corporate general and m | anaging partners | s of partnership issuers; and |
| Each general and ma | maging partner o | f partnership issuers. | | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | □ Director | General and/or Managing Partner |
| Full Name (Last name first, if it | ulividual) | | | | |
| Michael G. Halper | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code | =) | | |
| 1000 Sansome Street, St | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, if it | a lividual) | | | | |
| Lubert-Adler Real Estat | | | , | | |
| Business or Residence Address | | • | | | |
| 2929 Arch Street, Suite | | | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, if in | dividual) | | | | |
| | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code | =) | | |
| | | _ | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name (Last name first, if it | idividual) | | | | wanaging radici |
| | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code | :) | | |
| | | | | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | Director | General and/or |
| Full Name (Last name first, if it | ndividual) | | | | Managing Partner |
| | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code | :) | | |
| | | | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | ☐ Director | General and/or |
| Full Name (Last name first, if | ndividual) | | | | Managing Partner |
| | | | | | |
| Business or Residence Addres: | (Number and St | reet, City, State, Zip Code | :) | | |
| | | | | | |
| Check Box(es) that Apply: | Promote · | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| | | | | | |
| Full Name (Last name first, if in | ndividual) | Man | | | |
| | | | | | |
| Business or Residence Address | (Number and St | reet, City, State, Zip Code |) | | |
| | | | | | |
| | (Use blank she | et, or copy and use addition | onal copies of this sheet, | as necessary.) | |

| | | | | B. 1 | INFORMA | TION AB | OUT OFFE | RING | | · | | |
|--|---|--|--|--|---|--|--|---------------------------------------|---|------------------------------|------------------------------|------------------------------|
| 1. | Has the iss | ıer sold, or | | | | | edited invo | | - | ş? | Yes | No |
| 2. | What is the | minimum | investment | that will l | be accepte | d from any | y individus | d? | | | \$ <u>N/A</u> | |
| | | | | | | | | | | | Yes | No |
| | Does the of Enter the in | | _ | • | - | | | | | | | \boxtimes |
| | enter the findirectly, with sales of broker or dealer. If region may see Name (Last | any commof securities ealer regist more than for the forth the i | ission or s in the offeered with t ive (5) personnerment | imilar ren ering. If a he SEC ar sons to be for that b | nuneration person to nd/or with listed are roker or d | for solic be listed a state or associated | itation of is an assoc states, list I persons o | purchasers iated perse the name | s in conne on or agen of the brol | ection t of a cer or | | |
| 1 411 | variic (Lasi | name mst, | | 1972 | 1 | | | | | | | |
| Busin | ness or Res | dence Add | ress (Numb | er and St | reet, City, | State, Zip | Code) | | | | | |
| Nam | e of Associ | ated Broker | cr Dealer | | | | | | | | · - · | |
| State | s in Which | Person List | e i Has Sol | icit: d or I | ntends to S | Solicit Pur | chasers | | | | | |
| (Che | ck "All Sta | es" or chec | k individu: | al States). | | | ••••• | | •••••• | | 🗖 | All States |
| [AL] [IL] [MT] [RI] Full I | [AK] [IN] [NE] [SC] Name (Last | [AZ] [IA] [NV] [SD] name first, | [AR] [KS] [NH] [TN] if individu | [CA] [KY] [NJ] [TX] al) | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | (DE) [MD] [NC] [VA] | (DC] [MA] [ND] [WA] | [FL] [M1] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | [ID] [MO] [PA] [PR] |
| Busia | ess or Res | dence Add | ress (Numb | er and Str | eet, City, | State, Zip | Code) | | | | | . |
| Nam | e of Associ | ated Broker | or Dealer | | | | | | | | | |
| State | s in Which | Person List | ed Has Sol | icited or I | ntends to S | Solicit Pur | chasers | | | | | |
| (Che | ck "All Stat | es" or chec | l. individua | ıl States). | | | | | | | 🗆 | All States |
| (AL) (IL) (MT) (RI) Full (| [IN] | [AZ] [IA] [NV] [SD] name first, | [AR] [KS] [NH] [TN] if individu | [CA] [KY] [NJ] [TX] al) | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | (ID) [MO] (PA] [PR] |
| Busin | ness or Resi | dence Add | ess (Numb | er and Str | eet, City, | State, Zip | Code) | | | | | |
| Name | e of Associa | ated Broker | or Dealer | | | | | | | | | |
| State | s in Which | Person List | d Has Sol | ici ed or I | ntends to S | Solicit Pur | chasers | | | | - | |
| (Che | ck "All Stat | es" or chec | c individua | ıl States). | | | | | | •••••• | | All States |
| [AL] [IL] [MT] [RI] | [AK] [iN] [NE] [SC] | [AZ] [IA] [NV] [SD] | [AR] [KS] [NH] [TN] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | [ID] [MO] [PA] [PR] |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFEILING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of secur ties included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchange. | | |
|----|---|-----------------------------|---|
| | Type of Security | Aggregate Offering Price | Amount Already Sold |
| | Debt | \$ <u>-0-</u> | \$ <u>-0-</u> |
| | Equity | \$0- | \$0- |
| | Coramon Preferred | | |
| | Convertible Securities (including warrants) | \$ <u>-0-</u> | \$ <u>-Q</u> - |
| | Partnership Interests | \$ <u>-0-</u> | \$ <u>-0-</u> |
| | Other (Specify LLC Nember Interests) | \$ <u>4,500,000</u> | \$ <u>4,500,000</u> |
| | Total | | \$_4,500,000 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | |
| | Accredited Investors | Number Investors | Aggregate Dollar Amount of Purchases \$ 4,500,000 |
| | Non-accredited Inves ors | | \$ -0- |
| | Total (for filings under Rule 504 only) | | \$ \$_N/A |
| | Answer also in Aprendix, Column 4, if filing under ULOE. | | 3_IVA |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. | | |
| | Type of offering | Type of Security | Dollar Amount Sold |
| | Rule 505 | N/A | \$_N/A |
| | Regulation A | N/A | \$_N/A |
| | Rule 504 | N/A | \$_N/A |
| | Total | _ N/A | \$_N/A |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| | Transfer Agent's Fees | | \$ |
| | Printing and Engraving Costs | | s |
| | Legal Fees | 🛛 | \$_10,000 |
| | Accounting Fees | 🛛 | \$ 2,000 |
| | Engineering Fees | | \$ |
| | Sales Commissions specify finders' fees separately) | | \$ |
| | Other Expenses (ide tify) | | \$ |
| | Total | | \$ <u>12,000</u> |

| | C. OFFEI ING PRICE | , NUMBER OF INVESTORS, EXPENSES | AND U | JSE OF PROCE | EEDS |
|-------|---|---|------------------|--|------------------------------|
| | Question 1 and total expenses furnished in | regate offering price given in response to Pa response to Part C – Question 4.a. This difference." | erence | | \$_4,488,000 |
| 5. | used for each of the purposes shown. If t estimate and check the box to the left of | pross proceeds to the issuer used or proposed in amount for any purpose is not known, furnific estimate. The total of the payments listed stuer set forth in response to Part C – Questimate. | ish an I must | | |
| | | | | Payments to Officers, Directors, & Affiliates | |
| | Salaries and fees | | | \$ | <u> </u> |
| | Purchase of real estate | | ⊠ | s | \$_4,488,000 |
| | Purchase, rental or leasing and instal | lation of machinery and equipment | 🗆 | \$ | \$ |
| | Construction or leasin 3 of plant build | lings and facilities | □ | s | \$ |
| | | iding the value of securities involved in this | | | |
| | | inge for the assets or securities of another | | <u>\$</u> | s |
| | Repayment of indebtedness | | 🔲 | s | <u> </u> |
| | Working capital | | | s | |
| | | | | s | s |
| | | | | s | s |
| | Column Totals | | ⊠ | s | \$4,488,000 |
| | Total Payments Listed (column total | ; added) | | | \$_4,488,000 |
| | | D. FEDERAL SIGNATURE | | | |
| follo | wing signature constitutes an undertaking | signed by the undersigned duly authorized p by the issuer to furnish to the U.S. Securities to any non-accredited investor pursuant to par | and Exc | change Commiss | ion, upon written request of |
| Issu | er (Print or Type) | Signature. | D | ate | , |
| 1633 | Bayshore Associates, LLC | Mulal Hey | | 9/5/ | 77 |
| Nan | e of Signer (Print or Type) | Title of Signer (Print or Type | | | |
| Mic | hael G. Halper | Manager | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | ATTENTION | | | |
| Inte | ntional misstatements or c missions of fa | t constitute federal criminal violations. (Se | e 18 U.S | S.C. 1001.) | |

| | | E. STATE SIGNATURE | | |
|---------|---|---|------------|-------------|
| 1. | | CFR 23 ¹).252(c), (d), (e) or (f) presently subject to any of the disqualification | Yes | No ⊠ |
| | | See Appendix, Column 5, for state response. | | |
| 2. | | under akes to furnish to any state administrator of any state in which this notice uch tin es as required by state law. | is filed, | a notice on |
| 3. | The undersigned issuer hereby issuer to offerees. | undertakes to furnish to the state administrators, upon written request, informa | tion furni | shed by the |
| 4. | limited Offering Exemption (L | ents that the issuer is familiar with the conditions that must be satisfied to be en PLOE) of the state in which this notice is filed and understands that the issuer claim of entablishing that these conditions have been satisfied. | | |
| | er has read this notification and ned duly authorized person | knows the contents to be true and has duly caused this notice to be signed | on its be | half by the |
| - | rint or Type) yshore Associates, LLC | Signature Date 9/5/07 | | |
| Name of | Signer (Print or Type) | Title of Signer (Print or Type) | | |

Manager

Instruction:

Michael G. Halper

Frint the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| | | | ŀ | APPENI | DIX | | | | | |
|-------|---------------------------------|--|---|--------------------------------------|---|----------------|--------|--|---|--|
| 1 | Intend to non-a investors | to sell ccredited s in State -Item 1) | Type of security and ag gregate offering price offered in state (Part C-Item 1) | | Type of in amount purch (Part C- | nased in State | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | |
| State | Yes | No | LLC Interests | Number of Accredited Investors | Amount | Yes | No | | | |
| AL | 1 | | 230000 | | , | Investors | Amount | | | |
| AK | | | | | | | | | | |
| AZ | | | | | | | | | | |
| AR | | | | | | | | | | |
| CA | | х | \$460,00) | 5 | \$460,000 | 0 | \$0 | | х | |
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| | | | | APPENI | DIX | | | | |
|-------|---|----------|---|--------------------------------------|---|-------------------------------------|--------|----------|---|
| 1 | Intend to sell to non-accredited investors in State (Part B-Item 1) | | Type of security and agg regate offering price offered in state (Part C-Item 1) | | 4 Type of investor and amount purchased in State (Part C-Item 2) | | | | 5 lification tate ULOE s, attach nation of granted) E-Item 1) |
| State | Yes | No No | LLC Interests | Number of Accredited Investors | Amount | Number of Non- Accredited Investors | Amount | Yes | No |
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